

co-pay for them. And the HMOs rather than the doctors are going to determine what drugs, what prescription drugs are going to be paid for under this plan. Then I will say there will be no reimportation allowed, and I know there will be a number of those who supported the reimportation. I will say one of the greatest shams of this bill is that it does not allow, Mr. Chairman, it does not allow the government to negotiate lower prices for prescription drugs under Medicare.

What an insult. It does not allow the government to save money. The reason for that is, and let me say I have no argument with the pharmaceutical companies. They do great work. I say that in terms of research and finding prescription drugs or drugs that will allow us to live longer or cure our ailments, but their participation in this kind of misfortune, in this legislation of tying the hands of government is a travesty.

So I would simply say that we will not have the time that we need to debate this tomorrow on the floor of the House. I know this is going to hurt Hispanics and African Americans. And I would just simply argue the point, Mr. Speaker, that this is a bad bill. Send it back as the Congressional Black Caucus would like you to do and put forward something that is reasonable and that works to help all Americans of which tomorrow's legislation will not do.

Mr. CUMMINGS. Mr. Speaker, I will close by simply thanking the Members of Congressional Black Caucus for being here tonight and being a part of all of this. I have often said that a hundred years ago, none of us were here. A hundred years from now, none of us will be here. The critical question is what do we do while we are here to lift each other up.

The fact is that we have a bill on the floor of this House tomorrow which is supposed to be a prescription benefit bill when, in fact, it does much more harm than good. And I think that when all the dust settles, when everything is laid out very clearly, the question becomes, Have we lifted our seniors up? So many of them have begged for relief. So many of them have cut pills in half and in quarters. So many of them have gone from one drug store to another begging for prescriptions.

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So many of them have almost broken out in tears when they found out that their doctor did not have the sample prescription drugs that they needed, and so we stand here tonight not only saying that we consider the prescription drug bill to be bad, bad news, but we also on the other hand, Mr. Speaker, offer our HealthCare Equality Accountability Act of 2003 to say that we have a piece of legislation that does not cure everything but certainly it helps; but on the other hand, we have another piece of legislation, the prescription drug bill which does so much harm.

#### REPORT ON RESOLUTION PROVIDING FOR CONSIDERATION OF MOTIONS TO SUSPEND THE RULES

Ms. PRYCE of Ohio (during the Special Order of Mr. CUMMINGS) from the Committee on Rules, submitted a privileged report (Rept. No. 108-387) on the resolution (H. Res. 456) providing for consideration of motions to suspend the rules, which was referred to the House Calendar and ordered to be printed.

#### REPORT ON RESOLUTION WAIVING POINTS OF ORDER AGAINST CONFERENCE REPORT ON H.R. 1904, HEALTHY FORESTS RESTORATION ACT OF 2003

Ms. PRYCE of Ohio (during the Special Order of Mr. CUMMINGS) from the Committee on Rules, submitted a privileged report (Rept. No. 108-388) on the resolution (H. Res. 457) waiving points of order against the conference report to accompany the bill (H.R. 1904) to improve the capacity of the Secretary of Agriculture and the Secretary of the Interior to plan and conduct hazardous fuels reduction projects on National Forest System lands and Bureau of Land Management lands aimed at protecting communities, watersheds, and certain other at-risk lands from catastrophic wildfire, to enhance efforts to protect watersheds and address threats to forest and rangeland health, including catastrophic wildfire, across the landscape, and for other purposes, which was referred to the House Calendar and ordered to be printed.

#### REPORT ON RESOLUTION WAIVING REQUIREMENT OF CLAUSE 6(a) OF RULE XIII WITH RESPECT TO CONSIDERATION OF CERTAIN RESOLUTIONS

Ms. PRYCE of Ohio (during the Special Order of Mr. CUMMINGS) from the Committee on Rules, submitted a privileged report (Rept. No. 108-389) on the resolution (H. Res. 458) waiving a requirement of clause 6(a) of rule XIII with respect to consideration of certain resolutions reported from the Committee on Rules, which was referred to the House Calendar and ordered to be printed.

#### REPORT ON RESOLUTION WAIVING REQUIREMENT OF CLAUSE 6(a) OF RULE XIII WITH RESPECT TO CONSIDERATION OF CERTAIN RESOLUTIONS

Ms. PRYCE of Ohio (during the Special Order of Mr. CUMMINGS) from the Committee on Rules, submitted a privileged report (Rept. No. 108-390) on the resolution (H. Res. 459) waiving a requirement of clause 6(a) of rule XIII with respect to consideration of certain resolutions reported from the Committee on Rules, which was referred to the House Calendar and ordered to be printed.

#### MEDICARE PRESCRIPTION DRUG BILL

The SPEAKER pro tempore (Mr. ROGERS of Alabama). Under the Speaker's announced policy of January 7, 2003, the gentleman from Georgia (Mr. GINGREY) is recognized for 60 minutes as the designee of the majority leader.

Mr. GINGREY. Mr. Speaker, it is good to be back tonight to talk on an issue that is really very, very dear to my heart. We have got an exciting day. In fact, I do not think I could even, though it is a late hour, I do not think I could go home and sleep tonight in anticipation of a historic moment tomorrow when we will finally deliver on a promise that has been made to our seniors, and that is a prescription drug benefit under Medicare.

Mr. Speaker, I would like to start out by maybe addressing some of the remarks that I just heard made from the other side, and it is the kind of remarks which I would really refer to as "Mediscare" comments. I just heard the gentlewoman from Texas refer to the government not being able to set prices. I think that is exactly what the Democrats tried to do in 1993 under "Hillary care." They wanted the government to set prices. They wanted a one-size-fits-all, essentially a national health insurance program, and the people of this great country rejected that.

Another comment I have heard them say just repeatedly is this business about, well, who is going to benefit from this prescription drug availability for our seniors, who is going to benefit the most, and they keep saying, well, it is the drug companies, the evil, greedy drug companies. Well, of course, no duh. Who makes the drugs? Who has made this country the greatest Nation on Earth in regard to having access to life-saving drugs? The pharmaceutical industry. Who do we expect? Who does the other side expect to provide these drugs? The chocolate cookie company or the potato chip factory? No, it is the pharmaceutical industry, of course.

Did they say the same thing in 1965, 40 years ago when Medicare was first enacted, that gosh, you know, we cannot do this, this program because who is going to benefit the most from Medicare part A, the evil hospitals, the evil skilled nursing homes; or who is going to benefit the most from Medicare part B, the doctors? Absolutely the doctors. They are the ones that provide health care.

So this argument about the drug company being the big beneficiary, it is absolutely bogus. Sure they are going to provide drug coverage, sell more drugs certainly, but the price of those drugs, Mr. Speaker, is going to come down. Their profit margin per sale is going to be drastically reduced. So, again, we hear these arguments over and over again, and it truly is nothing but "Mediscare."

Another argument we hear, and we have been hearing it today, we will probably hear it all day tomorrow and as long as this debate goes on, is the